



## CONTRACT AMENDMENT

1. AMENDMENT #: <p style="text-align: center;"><b>9</b></p>	2. CONTRACT #: <p style="text-align: center;"><b>YH18-0001-03</b></p>	3. EFFECTIVE DATE OF AMENDMENT: <p style="text-align: center;"><b>OCTOBER 1, 2019</b></p>	4. PROGRAM: <p style="text-align: center;"><b>ALTCS E/PD</b></p>															
5. CONTRACTOR NAME AND ADDRESS: <p style="text-align: center;"><b>UnitedHealthcare Community Plan 1 East Washington, Suite 900 Phoenix, AZ 85004</b></p>																		
6. PURPOSE: To retroactively amend select Capitation Rates for the month of October, 2019.																		
7. THE ABOVE REFERENCED CONTRACT IS HEREBY AMENDED AS FOLLOWS:  <p>Section 9010 of the Patient Protection and Affordable Care Act (ACA) requires that the Contractor pay a Health Insurer Provider Fee (HIPF) annually based on its respective market share of premium revenues from the preceding year (calendar year 2019 revenue). AHCCCS provides funding to the Contractor for the HIPF and associated taxes subject to receipt and review of documentation from the Contractor as required by AHCCCS.</p> <p>This contract amendment serves to retroactively adjust the October, 2019 capitation rates to include the federal and state income taxes associated with the 2020 Health Insurer Provider Fee, and amends the following sections of the Contract:</p> <p><b><u>Section B: Capitation Rates:</u></b></p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #d9e1f2;"> <th colspan="3" style="text-align: center;">Capitation Rates October 1, 2019</th> </tr> <tr style="background-color: #d9e1f2;"> <th style="width: 30%;"></th> <th style="width: 35%; text-align: center;">Central</th> <th style="width: 35%; text-align: center;">North</th> </tr> <tr style="background-color: #d9e1f2;"> <th style="text-align: center;">County</th> <th style="text-align: center;">(Maricopa, Gila and Pinal Counties)</th> <th style="text-align: center;">(Mohave, Coconino, Apache, Navajo and Yavapai Counties)</th> </tr> </thead> <tbody> <tr> <td>EPD Long Term Care – Dual-Eligible</td> <td style="text-align: center;">\$3,036.05</td> <td style="text-align: center;">\$3,124.24</td> </tr> <tr> <td>EPD Long Term Care – Non-Dual-Eligible</td> <td style="text-align: center;">\$7,877.52</td> <td style="text-align: center;">\$7,238.08</td> </tr> </tbody> </table>				Capitation Rates October 1, 2019				Central	North	County	(Maricopa, Gila and Pinal Counties)	(Mohave, Coconino, Apache, Navajo and Yavapai Counties)	EPD Long Term Care – Dual-Eligible	\$3,036.05	\$3,124.24	EPD Long Term Care – Non-Dual-Eligible	\$7,877.52	\$7,238.08
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8. <b>EXCEPT AS PROVIDED FOR HEREIN, ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT NOT HERETOFORE CHANGED AND/OR AMENDED REMAIN UNCHANGED AND IN FULL EFFECT.</b>  <b>IN WITNESS WHEREOF THE PARTIES HERETO SIGN THEIR NAMES IN AGREEMENT.</b>																		
9. SIGNATURE OF AUTHORIZED REPRESENTATIVE:   <small>Jean Kalbacher (Nov 3, 2020 14:04 MST)</small>		10. SIGNATURE OF AHCCCS CONTRACTING OFFICER:   <small>Meggan LaPorte (Oct 22, 2020 10:59 PDT)</small>																
TYPED NAME: <p style="text-align: center;">Jean Kalbacher</p>		TYPED NAME: <p style="text-align: center;">Meggan LaPorte</p>																
TITLE: <p style="text-align: center;">CEO</p>		TITLE: <p style="text-align: center;">Chief Procurement Officer</p>																